		DECLARATION FO	OR PATENT APPLICATION A	ND POWER OF ATTORNEY	ATTORNEYS DOCKET NUMBER 99 P 5536						
		As a balance and im	A Lauren I house de designe that								
	As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name.										
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	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
		Method for capp	oing an electric lamp	e e e e e e e e e e e e e e e e e e e							
	the ci	pecification of which									
		is attached hereto.									
		was filed as United	1								
		was med as cinted	otates application								
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		on									
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Alian II		Number PC7	T/DE00/01935								
		on <u>14t</u>	h June 2000								
J		and was amended u	inder PCT Article 19								
3		on		(if applicable).							
and the state of	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.										
			disclose information which is ma Code of Federal Regulations, §1.	terial to the examination of this ap 56(a).	oplication in						
	for particular for particular than to	atent or inventor's cer than the United State atent or inventor's cer	rtificate or of any PCT internation es of America listed below and ha rtificate or any PCT international America filed by me on the same	ed States Code, §119 of any foreignal application(s) designating at leave also identified below any foreignapplication(s) designating at least subject matter having a filing date	ast one country gn application(s) one country other						
PRIOR F	OREIC	N/PCT APPLICATIO	DN(S) AND ANY PRIORITY CLAI	MS UNDER 35 U.S.C. 119:							
	CC	DUNTRY	APPLICATION NUMBER	DATE OF FILING	PRIORITY CLAIMED						
		ndicate "PCT")		(day, month, year)	UNDER 35 USC 119						
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☐ Yes ☐ No

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	Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT Internation applications) ATTORNEYS DOCKET NUMBER 99 P 5536											
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					Patent and Trademark Office connected therewith. (List name and research to the state of the sta				registra- alls to: number)			
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	POST OFFICE	Graben POST OFFICE ADI	ORESS		Federal Republic of Germany			Federal Republic of Germany STATE & ZIP CODE/COUNTRY				
	ADDRESS	Sanddorns			D-86836 Graben			Federal Republic of Germany				
-0	FULL NAME OF	NAME OF FAMILY NAME ENTOR DIEKMANN			FIRST GIVEN NAME Ruediger			SECOND GIVEN NAME				
202	RESIDENCE & CITIZENSHIP POST OFFICE	CITY Dillingen POST OFFICE ADDRESS			STATE OR FOREIGN COUNTRY Federal Republic of Germany		´	COUNTRY OF CITIZENSHIP Federal Republic of Germany STATE & ZIP CODE/COUNTRY				
	ADDRESS FULL NAME OF INVENTOR	Winterthurer-Weg 7			D-89407 Dillingen FIRST GIVEN NAME			Federal Republic of Germany SECOND GIVEN NAME				
203	RESIDENCE & CITIZENSHIP	CITY			STATE OR FOREIGN COUNTRY			COUNTRY OF CITIZENSHIP				
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